

2700 INTERNAL TRANSFER REQUEST FOR S.N.

DATE: <u>4/27/02</u>	FROM: <u>09/980, 857</u>	(print name)
FORWARD TO: A. Art Unit: <u>2642</u> B. Class: <u>379</u> C Subclass: <u>419</u>		REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):
<input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box)		

FURTHER EXPLANATION IF NEEDED:

Handfree Device

OK for 379/387.0

DATE: _____	FROM: _____	(print name)
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____		REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):
<input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box)		

FURTHER EXPLANATION IF NEEDED:

DATE: _____	FROM: _____	(print name)
FORWARD TO CLASSIFIER 		REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):
<input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box)		

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION		
DATE: _____	CLASSIFIER: _____	
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____		REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):
<input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box)		

FURTHER EXPLANATION IF NEEDED: